

**August 13-14, 2018
Madrid, Spain**

J Addict Res Ther 2018, Volume 9
DOI: 10.4172/2155-6105-C2-040

ADDICTION TREATMENT

Raymond V Tamasi

USA

Addiction is a chronic health condition that affects 40 percent of the American public. It costs society more than \$400 billion annually (excluding nicotine), is responsible for up to 45% of all hospital emergency room admissions and is implicated in 66% of incarcerations [1,2]. Of the estimated 23-25 million people who need addiction treatment, about 2.5 million (10%) receive it [3]. Stigma, insurance barriers, and the perception by many that they don't have a problem have limited access to care. Efforts to reduce stigma in the United States through awareness programs, the 2008 Mental Health and Addiction Parity Act, and the influx of newly insured patients through the ACA (Obamacare) have sparked new interest and led to rapid growth of inpatient rehabilitation programs. However, despite wider acceptance of addiction as a chronic brain disorder, treatment continues to be developed and defined by an emphasis on acute, time-limited treatments. Addiction treatment has been defined and judged by this misplaced perception that a fixed duration of treatment will

"fix the problem". This fragmented approach fails to provide the life-long management necessary to ensure sustained remission and it results in high rates of relapse and readmissions to acute care. Greatly underemphasized is the absence of substantial and comprehensive community based continuing care and the paucity of prevention, early identification and intervention efforts. The absence of comprehensive follow-up care, prevention and early intervention contradicts the standard treatment of chronic disease. New ideas, innovative service delivery methods, the use of addiction medications, alternative clinical interventions, and technological supports need to be developed, tested, and utilized. This presentation will describe an approach that incorporates prevention, early intervention, and extended engagement with traditional models of care to create seamless, integrated care that can produce more favorable long term outcomes.

rtamasi@gosnold.org